

FOLK ARTS APPRENTICESHIP PROJECT

APPLICATION FORM

SECTION I (The MASTER ARTIST / teacher should fill out this section)

Name of master artist / teacher _____

Mailing address _____

City, state, zip _____

Telephone where you can be reached (days) _____ (evenings) _____

Email address _____ cell phone _____

If no phone, provide a contact name with phone: **(We must have a phone contact to process this application)**

Name _____ Phone _____

Date of birth _____ Place of birth _____

Social security number _____

Community group to which you belong (ie. Ranching, Craft guild, Native-American tribe, Bosnian, etc)

Traditional art form you wish to teach _____

Name of apprentice with whom you will work _____

What is your relationship to the apprentice? _____

How long has your apprentice been involved in the particular performance or craft? _____

Have you applied for and/or received the Folk Arts Apprenticeship Grant before?

a. Yes ____ No ____ b. What years? _____

c. With whom did you work? _____

Have you applied for and/or received an Ethnic Arts Grant before?

a. Yes ____ No ____ b. What years? _____

c. What were the funds used for? _____

If you have received an Ethnic Arts Grant or Folk Arts Apprenticeship grant, how has it improved your art or performance?

What people have you learned your skills from? _____

Where and when did you start learning this? How old were you then? _____

Where do you usually work on your art or where do you practice? _____

If you are a crafts worker, what do you do with the finished products? If you are a musician, dancer or other performer, please describe past performances both, in your community or in other places.

If you have taught others this skill in the past, whom did you teach and when? _____

Indicate kind of samples being submitted by MASTER for evaluation by the Folk Arts Panel with application no later than December 31 (please circle):

Photographs

Slides

Artifacts

CD

Cassette

Video

Other (specify): _____

Artifacts must be submitted no later than January 30

MASTER ARTIST'S SIGNATURE: I am willing to take _____ as an apprentice according to the plans outlined in the application.

Signature

Date

Social Security Number

Applications must be delivered or postmarked by December 31

No application will be considered without samples of MASTER'S work

Folk Arts Program / Utah Arts Council / 617 E. South Temple / Salt Lake City, UT 84102

(801) 533-5760

SECTION II (APPRENTICE / student should fill out this section)

Name of apprentice _____
Mailing address _____
City, state, zip _____
Telephone where you can be reached (days) _____ (evenings) _____
Email address _____ cell phone _____
If no phone, provide a contact name with phone: **(We must have a phone contact to process this application)**
Name _____ Phone _____
Date of birth _____ Place of birth _____
Social security number: _____
Community group to which you belong (ie. Ranching, Craft guild, Native-American tribe, Bosnian, etc)

Traditional art form you wish to learn _____

Have you applied for and/or received the Folk Arts Apprenticeship Grant before?

b. Yes ____ No ____ b. What years? _____

d. With whom did you work? _____

Have you applied for and/or received an Ethnic Arts Grant before?

a. Yes ____ No ____ b. What years? _____

c. What were the funds used for? _____

If you have received an Ethnic Arts Grant or Folk Arts Apprenticeship grant, how has it improved your art or performance?

What people have you learned your skills from? _____

Where and when did you start learning? How old were you then? _____

Where do you usually work on your art, or where do you practice? _____

If you are a crafts worker, what do you do with the finished products? If you are a musician, dancer or other performer, please describe past performances both, in your community or in other places.

Why do you want to work with this master artist? _____

What are your plans for continuing this art form after the apprenticeship? _____

Indicate kind of samples being submitted by APPRENTICE for evaluation by the Folk Arts Panel with application no later than December 31 (please circle):

Photographs Slides Artifacts CD Cassette Video

Other (specify): _____

Artifacts must be submitted no later than January 30

APPRENTICE'S SIGNATURE: I am willing to work with _____
as his or her apprentice according to the plans outlined in this application.

Signature

Date

Social Security Number

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No application will be considered without samples of APPRENTICE'S work

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SECTION III (MASTER and APPRENTICE should fill out this section together)

APPRENTICESHIP PLAN

Please describe your plan of study. What skills or techniques will be taught during the apprenticeship? Describe the end product of the lessons (a list of songs or items to be made).

*How many lessons are needed to reach these goals? _____

**How many hours will each lesson be? _____

How often will you meet together (weekly, twice monthly, etc.)? _____

On what date will the apprenticeship begin (after April 1)? _____

On what date will the apprenticeship end (before March 31 of following year)? _____

BUDGET

A. Master artist's fee:

MULTIPLY the number of lessons * (____)

TIMES the number of hours for each lesson** (____)

TIMES the teacher's hourly fee (\$____)

[use the master's normal fee or \$15 per hour]

TO EQUAL a total of \$_____ (SUB-TOTAL A)

B. Supplies and materials (list each one and about how much it will cost):

_____ \$_____

_____ \$_____

_____ \$_____

_____ \$_____

ADD TOGETHER TO EQUAL a total of \$_____ (SUB-TOTAL B)

C. Mileage costs:

MULTIPLY the number of lessons during the apprenticeship* (____)

TIMES the number of miles the apprentice or the master drives each lesson (____)

TIMES 25 cents per mile TO EQUAL a total of \$_____ (SUB-TOTAL C)

TOTAL AMOUNT REQUESTED [\$2000 maximum] **A+B+C=** \$_____

You can use the back of this sheet if you need more room to describe your project.

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